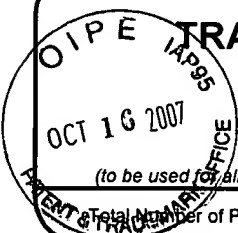


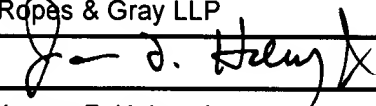
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 <p>TRANSMITTAL FORM</p> <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/303,216
	Filing Date	April 30, 1999
	First Named Inventor	Joseph L. Kim
	Art Unit	1647
	Examiner Name	Marianne P. Allen, Ph.D.
Total Number of Pages in This Submission	Attorney Docket Number	VPI/97-101 CIP CON RCE

ENCLOSURES (Check all that apply)

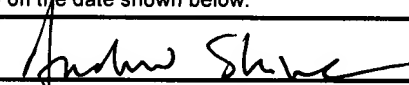
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Return postcard.
<div style="border: 1px solid black; padding: 5px;"> Remarks The Director is hereby authorized to charge payment of any fees required in connection with filing of these papers to Deposit Account No. 06-1075, Order No. 003752-0001. A duplicate copy of this form is transmitted herewith. </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Ropes & Gray LLP		
Signature			
Printed name	James F. Haley, Jr.		
Date	October 16, 2007	Reg. No.	27,794

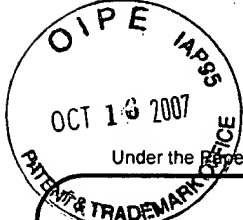
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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

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Art Unit

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Examiner Name

Marianne P. Allen, Ph.D.

Attorney Docket Number

VPI/97-101 CIP CON RCE

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	1. Return postcard.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks The Director is hereby authorized to charge payment of any fees required in connection with filing of these papers to Deposit Account No. 06-1075, Order No. 003752-0001. A duplicate copy of this form is transmitted herewith.	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

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Firm Name

Ropes & Gray LLP

Signature

Printed name

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